Family Broadcasting, Inc. WSTX AM & FM

P.O. Box 3279 Christiansted, St. Croix U.S. Virgin Islands 00822

(340) 773-0390 (340) 773-0490 Fax: (340) 773-8515

December 10, 2001

Ms. Catherine Henry
Joseph E. James Теттасе
Estate Ruby
Christiansted, St. Croix
U.S. Virgin Islands 00820

Dear Ms. Henry:

Attached please find U.S. Postal Money Order Number 90198081753, in the sum of TWO HUNDRED FIFTY DOLLARS (\$250.00), which represents reimbursement, in full, for five (5) shares of stock in Family Broadcasting, Inc. d/b/a Radio Stations WSTX-AM&FM.

This letter hereby acknowledges receipt of the above-referenced stock certificate. As noted previously, no profit has ever been realized; however, it has been our intention to return funds to those persons requesting same in exchange for return of the certificate. Economic conditions are dismal here in the Virgin Islands, to say the least, and if we don't look after one another no one else will.

May God continue to shower you with his blessings.

Very truly yours,

Barbara James-Petersen General Manager

Sarbara James-Peterser)

Attachments (2)

tx414 1/15/03 Tamuly Peterson-

Case No. Cl. 201 Official Exhibit No.

Disposition: Identified (GC, Board, Party)

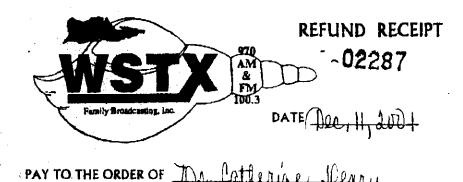
Rejected

IN THE MATTER OF:

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| | 5 | Ccs Withess: Reporter:





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|---------------------|-----------------------------|-----------------------|----|-------------------------|-----------------------------|-------------|------|
| | ACCOUNT | | | FORM | OF PAY | MENT | |
| | AMOUNT OF ACCOUNT | 420 | n | CASH | | | |
| | AMOUNT PAID | #200 | (U | CHECK | | | |
| | BALANCE DUE | c) | | MONEY ORDER | #90198 | 08175 | 1) |

Thank You

parlana James - Detersen

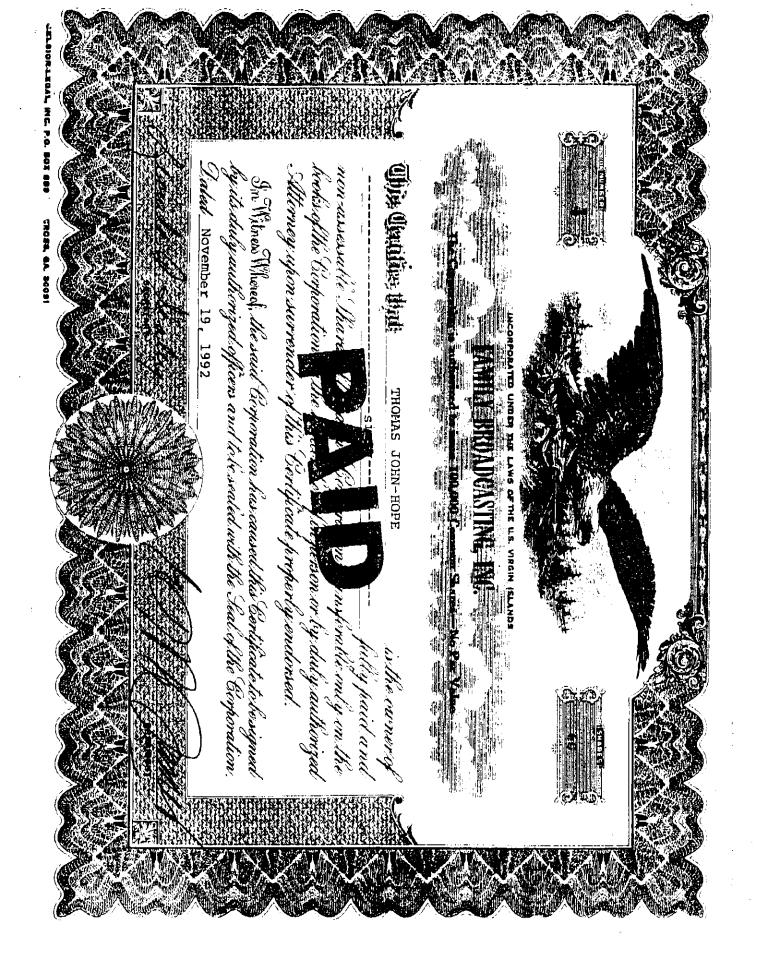
work-AM & FM

Refund Received

P.O. Box 3279, Christiansted, St. Croix, U.S. Virgin Islands 00822 Fort Louise Augusta Studios • (340) 773-0390 • (340) 773-0490 • Fax: (340) 773-8515

| UNITED STAT | ES POST | TAL MONE | Y ORDER | 12 - 800 000 12 - 800 |
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EXh 15 1/15/03 Tamely Defase

Case No. (-34 Official Exhibit No. (GC, Board, Party)

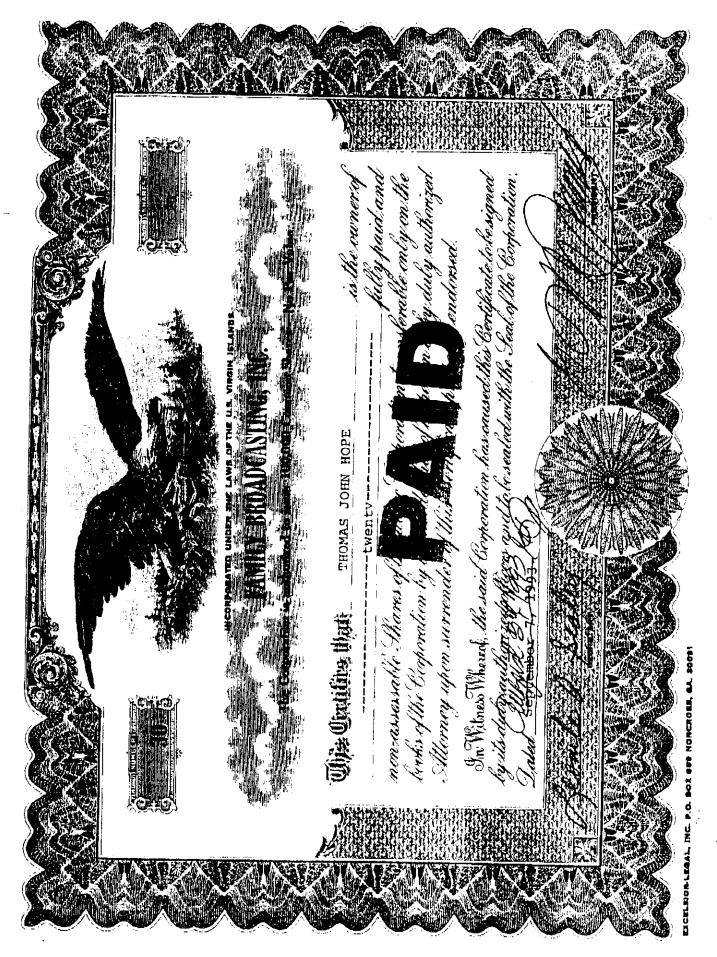
Rejected Received
IN THE MATTER OF.

Dote: Witness: Reporter:
No. Pavec.

Attorney upon surren **即中海即向地面** books of the Conporation wite duly authorized officers and to be sealed with the Leal of the Conporation. W September 7, 1993 . The said Corporation hus caused this Corn ----forty-EN UNDER THE LAWE OF THE U.S. VIRGIN (SLANDS TOLIA JOHN HOPE My andirsed: or by duly authorized is the owners

一种中间的 利便 Allorney upon surrena the above Corporation transferable and ---forty---JULIETTE JOHN HOPE hemonorky duly authori y endorsed.

EXCELSION-LEGAL, INC. P.O. BOX 80"



HFK-22-2002 HON 10.10 HU

Apr 16 02 03:16p

301-695-8734

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p.3

GIFT AND CONVEYANCE OF STOCK

Gift and Conveyance of Stock, made and entered into this 16th day of April, 2002, by Gerard Luz A James and Asta K. James, individuals and residents of Christiansted, St. Croix, U.S. Virgin Islands (collectively referred to as the "Donors"):

WITNESSETH:

WHEREAS, the Donors own certain shares of stock of a Virgin Islands corporation known as Family Broadcasting, Inc. ("FBI"); and

WHEREAS, FBI holds licenses issued by the Pederal Communications Commission ("FCC") for the operation of AM Broadcast Station WSTX and FM Broadcast Station WSXT-FM. Christiansted, St. Croix, U.S. Virgin Islands; and

WHEREAS, the Donors wish to donate all of their shares of stock to their children, Barbara James-Petersen, Gerard Luz A. James, II, Emmeth C. James and Kelsey G. James; and

WHEREAS, the Donors wish to make a free gift to their children of any indebtedness which FBI may owe to the Donors; and

WHEREAS, the donation of stock requires the prior consent of the FCC;

NOW, THEREFORE, for and in consideration of the Donors' desire to insure the preservation of Radio Stations WSTX AM and FM as a local, family-owned business, serving the needs of the Christiansted community, it is agreed as follows:

1. Gift of Stock: Subject to the prior consent of the FCC, Donors hereby give, bequeath and convey all of their stock in FBI, amounting to 93% of the issued and outstanding shares, to their children, Barbara James-Petersen, Gerard Luz A. James, II, Emmeth C. James and Kelsey G. Games (collectively referred to as the "Donees"), in equal portions. An application is

Identified

Received

7F. Case No. 29 Official Exhibit No.

Disposition:
Rejected Received.
IN THE MANTER OF.
A WWW STORY REPORTER:
Reporter:

indebtedness is hereby forgiven.

pending before the FCC for Commission consent to such transaction. Donors hereby appoint Barbara James-Petersen as their attorney-in-fact to transfer the stock on the books of the corporation as soon as the FCC has consented to such transfer.

2. Assignment of Indebtedness: To the extent that FBI owes any money or other

things of value to the Donors, the Donors hereby transfer, convey and assign such indebtedness to the aforesaid children in equal portions, so that EBI has no indebtedness; what have to the Donors. Also, to the extent that the Donces or any of them are indebted to the Donors or either of them, such

- 3. Retention of Control: Notwithstanding anything in this instrument to the contrary, the Donors shall retain their stock and voting rights until such time as the FCC has consented to the transfer of such stock and voting rights to the Donees.
- 4. Complete Agreement: This instrument constitutes the sole agreement of the Donors with respect to the subject matter hereof. It is binding and legally enforceable in the Courts of the U.S. Virgin Islands. There are no "side agreements", oral or written, between the Donors and Donees with respect to this gift of stock and assignment of indebtedness.

IN WITNESS WHEREOF, we have set our hands and seals on the day and year above written.

GERARD LUZ A. JAME

ASTA K. JAMES

| Federal Communications | Commission |
|------------------------|------------|
| Washington, D.C. 20554 | |

Approved by OMB FOR FCC USE ONLY 3060-0032 (September 1999)

FCC 315

APPLICATION FOR CONSENT TO TRANSFER CONTROL OF ENTITY HOLDING BROADCAST STATION CONSTRUCTION PERMIT OR LICENSE

FILE NO BTC - 20010315AAJ

Read INSTRUCTIONS Before Filling Out Form

| Section I - General Information | | |
|---|--|---|
| Legal Name of the Licensee/Permittee FAMILY BROADCASTING, INC. | | |
| Mailing Address P.O. BOX 3279 | | |
| City CHRISTIANSTED. ST. CROIX Telephone Number (include area code) 3407730390 | State of Country (if foreign address) E-Mail Address (if available) | Zip Code 00822 - |
| | Call Sign IWSTX | Facility ID Number 20589 |
| Contact Representative (if other than li LAUREN A. COLBY, ESQ. Telephone Number (include area code) 3016631086 | LAW C | Company Name FFICE OF LAUREN A. COLBY Address (I contained) |
| Governmental Entity Noncomm Purpose of Application: | ithout a fee, indicate reason for fee ex- | emption (see 17 C.C.D. C |
| Transfer of control of licensee Transfer of control of permittee Amendment to pending application | | |
| File number of pending application: | | |
| If an amendment, submit as an Exhibit Number of the portions of the pending a | polication that are being recent | [Exhibit 1] |
| Were any of the authorizations that are to Commission's competitive bidding process. list pertinent authorizations in an | he subject of this application obtained edures (see 47 C.F.R. Sections 1.2111) | a) and 73.5001)? Yes 11. No |
| a. Were any of the authorizations that ar Commission's point system for reserve C.F.R. Sections 73,7001 and 73,7003 | e the subject of this application obtains ed channel noncommercial educationa | stations (see 47 |
| b. If yes to 6(a), have all such stations or schedule since grant pursuant to the proof of the first pertinent authorizations in autransaction is consistent with the holding 73,7005(a). | perated for at least 4 years with a minural point system. | Yes No |

Section II - Transferor(s)

| Official Exhibit No. | Separation: Identified Received Received Received Received Received Reporter: Note: Witness: Reporter: | |
|----------------------|---|----------|
| Case No. 01-3 | Dispusition: Rejected IN THE MATT Cope: | No Fores |

| 1. Certification. Transferor(s) certify that it (they) have answered each question in this application based on its (their) review of the application instructions and worksheets. Transferor(s) further certify that where it (they) have made an affirmative certification below, this certification constitutes its (their) representation that the application satisfies each of the pertinent standards and criteria set forth in the application instructions and worksheets. | | | | | | |
|--|-----------------------------------|--|----------------------------------|--|--|--|
| 2. Legal Name of the Transferor GERARD LUZ A. JAMES AND ASTA K. JAM | | - Control Cont | · | <u></u> | | |
| Mailing Address 83 EST. ANNA'S HOPE | | | | | | |
| City State or Country (if foreign addr ST. CROIX VI | ess) Zip C 0082 | | | | | |
| Telephone Number E-Mail Ad (include area code) (340)7788802 | dress (if availabl | e) | | | | |
| Contact Representative (if other than transferor) LAUREN A. COLBY, ESQ. | | Firm or Company N LAW OFFICE OF L | ame AUREN A. CO | DLBA' | | |
| Telephone Number (include area code) (301)6631086 | | E-Mail Address (if a LAC @ LCOLBY.CC | vailāble) = == DM | - | | |
| If more than one transferor, submit the informat transferor. | ion requested in | questions 2 and 3 for | each | (Exhibit 4) | | |
| 4. Changes in interests as a result of transfer. | | | | | | |
| [Enter Changes in Interests Information] | | | | | | |
| Changes in | i Interests as a F | Result of Transfer | | | | |
| (A) NAMES AND (B) | | INTERES | T HELD | | | |
| ADDRESSES OF ANY CITIZENSHIP PARTY TO APPLICATION HOLDING AN | ASS | E TRANSFER OR IGNMENT | ASSIC | TRÁNSÉFR OR GNMENT | | |
| ATTRIBUTABLE INTEREST | (1) Percentage Votes | (2) Percentage Total Assets (Equity plus Debt) | (1) Percentage Votes | (2) Percentage Total Assets (Equity plus Debt) | | |
| GERARD LUZ A. JAMES. TUS EST. 83 ANNA'S HOPE. CHRISTIANSTED, ST. CROIX. USVI 00822 | | | () | () | | |
| (A) NAMES AND (B) ADDRESSES OF ANY CITIZENSHIP | | INTERES | | | | |
| PARTY TO APPLICATION HOLDING AN | ASSI | TIRANSH R OR TOTAL GNMLNT | 38810 | JRANSFER®ÖŘ ∂NMENT | | |
| ATTRIBUTABLE INTEREST | 17) Percentage Votes | (2) Percentage Total (Assets (Equity plus Debt) | (1) Percentage Votes | (2) Percentage Fotal - Assets (Equity plus - Debt) | | |
| ASTA K. JAMES, EST. 83 US ANNA'S HOPE, | 42 | 1- |) | | | |
| CHRISTIANSTED, ST. CROEX, USVI 00822 | | | | | | |
| • | | | | | | |
| | | | | | | |
| I certify that the statements in this application are trumade in good faith. I acknowledge that all certification | e, complete, and ons and attached | correct to the best of Exhibits are consider | my knowledge red material rep | and belief, and are resentations. | | |
| cyped or Printed Name of Person Signing GERARD LUZ A. JAMES | Typed | or Printed Title of Pe ESENTATIVE OF T | erson Signing | · | | |
| Signature | Date | ·- · | | · | | |
| WILLFUL FALSE STATEMENTS ON THIS FORM | 03-151 TARE PUNISH | ABLE BY FINE AN | D7OR TMPRISC |)NMENTALS | | |

CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)). AND OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503)

Section III - Licensee/Permittee

- 1. Certification. Licensee/permittee certifies that it has answered each question in this application based on its review of the application instructions and worksheets. Licensee further certifies that where it has made an affirmative certification below, this certification constitutes its representation that the application satisfies each of the pertinent standards and criteria set forth in the application instructions and worksheets.
- 2. Authorizations to be Assigned. List the authorized stations and construction permits to be assigned. Provide the Facility Identification Number and the Call Sign, or the Facility Identification Number and the File Number of the Construction Permit, and the location, for each station to be assigned. Include main stations, FM and or TV translator stations, LPTV stations. SCA, FM and/or TV booster stations, and associated auxiliary service stations

[Enter Station Information]

List the authorized stations and construction permits to be transferred. Provide the Facility Identification Number and the Call Sign, or the Facility Identification Number and the File Number of the Construction Permit, and the location, for each station to be transferred, Include main stations. FM and/or TV translator stations, LPTV stations, SCA, FM and or TV booster stations, and associated auxiliary service stations

| Facility ID Number | Call Sign | or | Construction Permit File Number | - City | State |
|-----------------------|-----------|----|---------------------------------|-----------------|-------|
| 20589 | WSTX | - | | CHRISTIANSTED ' | V1 |
| Facility ID Number | Call Sign | or | Construction Permit File Number | City | State |
| 20601 | WSTX-FM | - | | CHRISTIANSTED V | /T |
| | | | | | |

- 3. Agreements to Transfer Control of Station. Licensee permittee certifies that.
 - a, it has placed in its public inspection file(s) and submitted an an exhibit to this item copies of all agreements to transfer control of the station(s).
 - b. these documents embody the complete and final understanding between transferor(s) and transferee(s); and
 - c. these agreements comply fully with the Commission's rules and policies

Exhibit Required

- 4. Other Authorizations. List call signs, locations and facility identifiers of all other broadcast stations in which licensee permittee or any party to the application has an attributable interest.
- Character Issues. Licensee permittee certifies that neither incensee permittee nor any party to the application has or has had any interest in, or connection with
 - a, any broadcast application in any proceeding where character issues were left unresolved or were resolved adversely against the applicant or any party to the application, or
 - b, any pending broadcast application in which character issues have been raised
- 6 Adverse Findings. Licensee permittee certifies that, with respect to the licensee permittee and each party to the application, no adverse finding has been made, nor has an adverse final action been taken by any court or administrative body in a civil or criminal proceeding brought under the provisions of any law related to any of the following: any felony; mass media-related antitrust or unfair competition; fraudulent statements to another governmental unit; or
- Local Public Notice. Licensee/permittee certifies that it has or will comply with the public notice requirements of 47 C.F.R. Section 73.3580.

@ Yes C No

FYEN T No

See Explanation in [Exhibit 6]

 $rac{1}{2} \times \Lambda$

H Shibit 7]

Fres Francis

See Explanation in [18 noudz 1]

⊕ Yes ∩ No.

See Explanation in [Exhibit 9]

 $\bullet_{|Yes} \cap |_{No}$

| was acquired in an adenon through | gh the use of a bidding credit or | nan five years have passed assigned, where that permit other special measure. | C Yes C No |
|--|---|---|---|
| | | | See Explanation [Exhibit 10] |
| Anti-Drug Abuse Act Certifical heensee permittee nor any party in pursuant to Section 5301 of the A | O the application is compared a | | € Yes C No |
| ertify that the statements in this ap ade in good faith. I acknowledge th | plication are true, complete, and at all certifications and attached | correct to the best of my kn Exhibits are considered mat | owledge and belief, and erial representations |
| yped or Printed Name of Person S. ARBARA JAMES-PETERSEN | gning Type PRE | ed or Printed Title of Person SIDENT | Signing |
| gnature | Date | | |
| WILLFUL FALSE STATEMENTS CODE, TITLE 18, SECTION 100 RMIT (U.S. CODE, TITLE 47, SE | ON THIS FORM ARE PUNIS 1). AND OR REVOCATION OF ECTION 312(a)(1)). AND OR F | HABLE BY FINE AND OF FANY STATION LICENS ORFEITURE (U.S. CODE. | CIMPRISONMENT (U E OR CONSTRUCTIO TITLE 47, SECTION 5 |
| tion IV - Transferee(s) | | | - |
| Certification. Transferee(s) cer application based on its (their) re Transferee(s) further certify that this certification constitutes its (the pertinent standards and criteria certification). | where it (they) have made an aff | ons and worksheets. Irmative certification below | F Yes C No |
| Legal Name of the Transferee(s) | Torth in the application instruc | tions and worksheets | |
| BARBARA JAMES-PETERSEN Mailing Address P.O. BOX 3279 | I. ET AL. | tions and worksheets. | |
| BARBARA JAMES-PETERSEN Mailing Address P.O. BOX 3279 City State or Coul CHRISTIANSTED address) | Torth in the application instruc | tions and worksheets. | |
| Legal Name of the Transferee(s) BARBARA JAMES-PETERSEN Mailing Address P.O. BOX 3279 City State or Cour CHRISTIANSTED address) V1 Telephone Number (include area code) (340)7730390 | ntry (if foreign Zip Code 00822 - E-Mail Address (if availab | le) | |
| City State or Cour CHRISTIANSTED address) VI Telephone Number (include area code) (340)7730390 Contact Representative (if other the LAUREN A. COLBY, ESQ. Telephone Number (include area | E-Mail Address (if availab | irm or Company Name .AW OFFICE OF LAUREN | |
| Legal Name of the Transferee(s) BARBARA JAMES-PETERSEN Mailing Address P.O. BOX 3279 City State or Cour CHRISTIANSTED address) VI Telephone Number (include area code) (340)7730390 Contact Representative (if other that LAUREN A. COLBY, ESQ. Telephone Number (include area | E-Mail Address (if availab | irm or Company Name .AW OFFICE OF LAUREN | |
| City State or Cour CHRISTIANSTED address VI Telephone Number (include area code) (340)7730390 Contact Representative (if other that LAUREN A. COLBY, ESQ. Telephone Number (include area code) (301)6631086 If more than one transferee, submit ransferee | t forth in the application instruct. I. ET AL. Try (if foreign Zip Code 00822 - E-Mail Address (if availab an transferee) t code) It the information requested in contraction in the information requested in code (in the information requested in code) | irm or Company Name .AW OFFICE OF LAUREN | |
| City State or Cour CHRISTIANSTED address) VI Telephone Number (include area code) (340)7730390 Contact Representative (if other that LAUREN A. COLBY, ESQ. Telephone Number (include area (301)6631086 If more than one transferee, submit transferee. | E-Mail Address (if available code) it the information requested in ceree is: | irm or Company Name AW OFFICE OF LAUREN -Mail Address (if available) AC a LCOLBY COM juestions 2 and 3 for each | [Nlubu 11] |
| Legal Name of the Transferee(s) BARBARA JAMES-PETERSEN Mailing Address P.O. BOX 3279 City State or Cour CHRISTIANSTED address) VI Telephone Number (include area code) (340)7730390 Contact Representative (if other that the contact in the contact | E-Mail Address (if availabed) an transferee) it the information requested in code is: C a general partnership C a not-for-profit corporation. | irm or Company Name AW OFFICE OF LAUREN -Mail Address (if available) AC a LCOLBY COM juestions 2 and 3 for each a for-profit | [1 xhibit 11] |
| Contact Representative (if other than one transferee, submitransferee Malling Address P.O. BOX 3279 City State or Court address VI Telephone Number (include area code) (340)7730390 Contact Representative (if other than one transferee, submitransferee Nature of Applicant, Each transferee an individual a limited partnership | E-Mail Address (if availabed) an transferee) it the information requested in ceree is: C a general partnership | irm or Company Name AW OFFICE OF LAUREN -Mail Address (if available) AC a LCOLBY COM juestions 2 and 3 for each a for-profit | [1 xhibit 11] |
| Legal Name of the Transferee(s) BARBARA JAMES-PETERSEN Mailing Address P.O. BOX 3279 City State or Cour CHRISTIANSTED address) VI Telephone Number (include area code) (340)7730390 Contact Representative (if other that the contract of th | E-Mail Address (if available and transferee) It the information requested in corporation and transferee is: Cargeneral partnership Canot-for-profit corporation [Exhibit 12] | irm or Company Name AW OFFICE OF LAUREN -Mail Address (if available) AC a LCOLBY COM juestions 2 and 3 for each C a for-profition C a limited I (LLC/LC) | [1 xhibit 11] |
| City State or Cour CHRISTIANSTED address VI Telephone Number (include area code) (340)7730390 Contact Representative (if other that LAUREN A. COLBY, ESQ. Telephone Number (include area code) (301)6631086 If more than one transferee, submit transferee Nature of Applicant, Each transferee an individual a limited partnership | E-Mail Address (if available and transferee) It the information requested in corporation and transferee is: Cargeneral partnership Canot-for-profit corporation [Exhibit 12] | irm or Company Name AW OFFICE OF LAUREN -Mail Address (if available) AC a LCOLBY COM juestions 2 and 3 for each C a for-profition C a limited I (LLC/LC) | [1 xhibit 11] |

Exhibit Required

- 6. Parties to the Application.
 - a. List each transferee, and, if other than a natural person, its officers, directors, stockholders with attributable interests, non-insulated partners and or members. If a corporation or partnership holds an attributable interest in an transferee. list separately its officers, directors, stockholders with attributable interests, non-insulated partners and/or members. Create a separate row for each individual or entity. Attach additional pages if necessary
 - (E) Name and address of the transferee and (2) each party to the application holding an attributable interest (if other than individual also show name, address and citizenship of natural person authorized to vote the stock or holding the attributable interest). List the transferee first, officers next, then directors and, thereafter, remaining stockholders and other entities with attributable interests. and partners.

Citizenship.

Positional Interest: Officer, director, general partner, limited partner, LLC member, investor creditor attributable under the Commission's equity/debt plus standard, etc.

Percentage of votes.

Percentage of total assets requity plus debt-

[Enter Parties Owners Information]

6a. Parties to the Application

List each transferee, and, if other than a natural person, its officers, directors, stockholders with attributable interests, non-insulated partners and/or members. If a corporation or partnership holds an attributable interest in any transferee, list separately its officers, directors, stockholders with attributable interests, non-insulated partners and or members. Create a separate row for each individual or entity.

(1) Name and address of the transferee and each party to the application holding an attributable interest (if other than individual also show name, address and citizenship of natural person authorized to vote the stock or holding the attributable interest). List the transferee first, officers next, then directors and, thereafter, remaining stockholders and other entities with attributable interests, and partners.

(2) Citizenship.

(3) Positional Interest: Officer, director, general partner, limited partner, LLC member, investor creditor attributable under the Commission's equity/debt plus standard, etc. (4) Percentage of votes.

EMMUTHIC JAMES, \$40 E-169TTI STREET, API

14K, BRONX, NY 10456

(5) Percentage of total assets (equity plus debt). (1) Name and Address (2) Chizenship (3) Positional (4) Percentage (5) Percentage Interest of Votes of total assets requity plus debt) BARBARA JAMES-PUTERSEN, EST. 83 ANNA'S PRESIDENT DIRECTOR 2: HOPE, CHRISTIANSTED, ST. CROIX, USVI 00822 (1) Name and Address (2) Citizenship (3) Positional Interest (4) Percentage (5) Percentage of Votes of total assets. requity plus

(1) Name and Address (2) Citizenship (3) Positional Interest (4) Percentage (5) Percentage of Votes of total assets (equity plus debt). GURARD LÜZ A JAMES, IL 7H CATTIERINUS VICT RUST, CHRISTIANSTED, ST. CROIN, USVI 00820 PRESIDENTADIRECTOR

TREASURER DIRECTOR 25

(1) Name and Address (2) Citizenship (3) Positional Interest (4) Percentage (5) Percentage of Votes of total assets tequity plus debt). KELSEY G. JAMES, M.D., 1539 DEBATTISTA PLACE, NEW ORLEANS, LA 70131 SECRETARY DIRECTOR 21

debt).

Applicant certifies that equity interests not set forth above are non-attributable.

@ Yes C No

 \cap_{NA}

7. Other Authorizations. List call signs, locations, and facility identifiers of all other broadcast stations in which transferee or any party to the application has an attributable interest.

See Explanation in [Exhibit 15] $\overline{\mathsf{V}}_{NA}$

[Lxhibit 16]

6 Yes C No

See Explanation in: [Exhibit 17]

8. Multiple Ownership.

special measure.

a. Transferee certifies that the proposed transfer:

- 1. complies with the Commission's multiple and cross-ownership rules:
- 2. does not present an issue under the Commission's cross-interest policy:
- 3. does not present an issue under the Commission's policies relating to media interests of immediate family members:
- 4. complies with the Commission's policies relating to future ownership interests; and
- 5. complies with the Commission's restrictions relating to the insulation and non-participation of non-party investors and creditors.
- b. Radio Applicants Only. If the transfer of the station would result in certain principal community service contour overlaps, see Local Radio Ownership Worksheet, Question 1 applicant certifies that all relevant information has been placed in public inspection file(s) and submitted to the Commission.
- Yes No.
 - $\mathcal{C} \times \Lambda$
- 9. Character Issues. Transferee certifies that neither transferee nor any party to the application has or has had any interest in, or connection with:

See Explanation in Exhibit 181 @ Yes C No

a. any broadcast application in any proceeding where character issues were left unresolved or were resolved adversely against the applicant or any party to the application; or

See Explanation in [Exhibit 19]

b. any pending broadcast application in which character issues have been raised.

e Yes ⊂ No

10. Adverse Findings. Transferee certifies that, with respect to the transferee and each party to the application, no adverse finding has been made, nor has an adverse final action been taken by any court or administrative body in a civil or criminal proceeding brought under the provisions of any law related to any of the following: any felony; mass media-related antitrust or unfair competition; fraudulent statements to another governmental unit; or discrimination.

See Explanation in [Lxhibit 20]

11. Alien Ownership and Control. Transferee certifies that it complies with the provisions of Section 310 of the Communications Act of 1934, as amended, relating to interests of aliens and foreign governments.

@ Yes C No

12. Financial Qualifications. Transferee certifies that sufficient net liquid assets are on hand or are available from committed sources to consummate the transaction and operate the station(s) for three months.

See Explanation in [Exhibit 21]

@ Yes C No

13. Program Service Certification. Transferee certifies that it is cognizant of and will comply with its obligations as a Commission licensee to present a program service responsive to the issues of public concern facing the station's community of license and service area 14. Auction Authorization. Transferee certifies that where less than five years have passed since

the issuance of the construction permit and the permit had been acquired in an auction through the use of a bidding credit or other special measure, it would quality for such credit or other

See Explanation in [Lxhibit 22]

← Yes ← No.

15. Anti-Drug Abuse Act Certification. Licensee permittee certifies that neither licensee permittee nor any party to the application is subject to denial of federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862.

See Explanation in [Exhibit 23]

e Yes C No

16. EEO. Does the applicant propose to employ five or more full-time employees?

Cyerexo

If the answer is Yes, the applicant must include an EEO program called for in the separate Model EEO Program Report (FCC Form 396-A)

I certify that the statements in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge that all certifications and attached Exhibits are considered material representations. I hereby waive any claim to the use of any particular frequency as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and request an authorization in accordance with this application. (See Section 304 of the Communications Act of 1934, as amended.)

| Typed or Printed Name of Person Signing BARBARA JAMES-PETERSEN | Typed or Printed Title of Person Signing REPRESENTATIVE OF TRANSFEREES |
|---|--|
| Signature | Date 03/15/2001 |
| | |

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

Exhibits

Exhibit 4

Description: TRANSFERORS

GERARD LUZ A. JAMES, EST. 83 ANNA'S HOPE, CHRISTIANSTED, ST. CROIX, USVI 00822

ASTA K. JAMES, EST. 83 ANNA'S HOPE, CHRISTIANSTED, ST. CROIX, USVI 00822

Exhibit 6

Description: AGREEMENTS

THE COMMISSION HAS ISSUED AN ORDER TO SHOW CAUSE. DIRECTING FAMILY BROADCASTING, INC., TO SHOW CAUSE WHY THE LICENSES FOR AM BROADCAST STATION WSTX AND FM BROADCAST STATION WSTX-FM SHOULD NOT BE REVOKED.

HERETOFORE, LUZ JAMES, THE MAJORITY SHAREHOLDER, HAS HANDLED ALL OF THE COMPANY'S AFFAIRS RELATING TO THE FCC. IN A DECLARATION, FILED WITH THE PETITION FOR RECONSIDERATION ON MARCH 14, 2001, MR. JAMES HAS ACKNOWLEDGED THAT CERTAIN STATEMENTS HE MADE TO THE COMMISSION WERE NOT ACCURATE AND THAT THE STATIONS ARE NOT IN FULL COMPLIANCE WITH COMMISSION RULES AND REGULATIONS, TO CORRECT THAT PROBLEM, MR. JAMES HAS ALREADY RESIGNED AS PRESIDENT AND A DIRECTOR OF THE COMPANY, BY THIS APPLICATION, MR. JAMES AND HIS WIFE PROPOSE TO GIFT THEIR STOCK TO THEIR CHILDREN, NONE OF WHOM WERE INVOLVED IN ANY OF THE ALLEGED WRONGDOING.

Exhibit H

Description: TRANSFEREES

BARBARA JAMES-PETERSEN, P.O. BOX 34, CHRISTIANSTED, ST. CROIN, USVI 00821-0034

GERARD LUZ A. JAMES, H. P.O. BOX 4617, CHRISTIANTSTED, ST. CROIX, USVI 00822-4617

EMMETH C. JAMES, 540 E. 169TH STREET, APT. 14K, BRONX, NY 10456

KELSEY GERARD JAMES, M.D., 1539 DE BATTISTE PLACE, NEW ORLEANS, LA 70131

xhibit 13

Description: AGREEMENTS

SEE EXHIBIT 6

Exhibit 14

Description: PERCENTAGES

THE ACTUAL PERCENTAGES FOR EACH OF THE FOUR TRANSFEREES SHOULD BE 20.75 HOWT VER, THE CHART WOULD NOT ACCOMMODATE THAT FIGURE, SO THE PERCENTAGES SHOWN ON THE CHART WERE ROUNDED UP TO 21

| Federal Communications Commission Washington, D.C. 20554 | Approved by O | MB FOR FCC USE ONLY | |
|--|----------------------------------|---|-----------------------------|
| FCC 3 | 3000-0032 (September 19 | 99) | |
| | | | |
| APPLICATION FOR CON- | SENT TO TRANSFER | FOR COMMISSION US | E ONLY |
| CONTROL OF ENTITY HO STATION CONSTRUCTION | LDING BRUADCAST | BTC - 2001031 | 5AAJ |
| | I DIGHT OF LICENS | L | |
| Read INSTRUCTIONS Bef | ore Filling Out Form | ł | |
| Section I - General Information | | | |
| I. Legal Name of the Licensee/Permitte FAMILY BROADCASTING, INC. | e | | |
| Mailing Address | | | |
| P.O. BŎX 3279 | | | |
| City | | | |
| CHRISTIANSTED, ST. CROIX | State or Country (if fore | ign address) | Zip Code |
| Leiephone Number | E-Mail Address (if avai | lable) | 00822 - |
| (include area code) 3407730390 | () | | |
| 3.67.36330 | Call Sign | | |
| | WSTX | | Facility ID Number 20589 |
| 2. Contact Representative (if other than LAUREN A. COLBY, ESQ. | licensee/permittee) | Firm or Company Nar | ne |
| Telephone Number (include area code | 9) | LAW OFFICE OF LA E-Mail Address (if ava | UREN A. COLBY |
| B016631086 | <i>'</i> | | |
| 3. If this application has been submitted 1.1114): | without a fee, indicate reason | tor tee exemption (see | 47 C.F.R. Section |
| C Governmental Entity C Noncomm | | | |
| 4. Purpose of Application: | dercial Educational Licensee/ | Permittee Other | |
| C Transfer of control of licensee | | | |
| C Transfer of control of permittee | | | |
| Amendment to pending application | 1 | | |
| | | | |
| File number of pending application: | BTC-20010315AAJ | | i |
| If an amendment, submit as an Exhib | It a listing by Section and Our | | |
| hydrider of the borrious of the bending | application that are being and | | |
| of the authorizations that are | the supject of this applicant | | C v. C v. |
| 73.5001)? | cedures (see 4 / C.F.R. Section | ns 1.2111(a) and | C Yes © No |
| If yes, list pertinent authorizations in a | n Exhibit. | | [Exhibit 2] |
| 6.a. Were any of the authorizations that a | re the subject of this applicati | on obtained through th | |
| 47 C.F.R. Sections 73 7001 and 73 7 | nosva | ducational stations (see | Yes No |
| D. If yes to 6(a), have all such stations of | nerated for at least 4 years wi | th a minimum operation | 10 0 |
| If no, list pertinent authorizations in | Tribit and include in the | C. 1 11 1. | Yes No |
| | holding period requirements of | exhibit a showing that of 47 C.F.R. Section | [Exhibit 3] |
| 73.7005(a). | | · · · · · · · · · · · · · · · · | · |
| | | | |

Section II - Transferor(s)

9

| - cruncation. Transferor(s) | certify that it (the | v) have answer | ed each question in | the second | | |
|---|-----------------------|-------------------------|---|--|---|--|
| Application Transferor(s) certify that it (they) have answered each question in this application based on its (their) review of the application instructions and worksheets. | | | | | | |
| | | | | | | |
| this certification constitutes its (their) representation that the application satisfies each of the pertinent standards and criteria set forth in the application instructions and worksheets. | | | | | | |
| perment standards and criter. | 14 set fordt in the a | pplication instr | uctions and worksho | eets | | |
| Legal Name of the Transfero GERARD LUZ A. JAMES A | r | | | | | |
| Mailing Address | 110,111,11. | · ICS | | | | |
| 83 EST. ANNA'S HOPE | | | | | | |
| ST. CROIX VI | ry (if foreign addre | 0082 | 2 - | | | |
| l'elephone Number (include area code) (340)7788802 | E-Mail Add | ress (if availab | ie) | - | ···· | |
| Contact Representative (if oth LAUREN A. COLBY, ESQ. | ner than transferor) | | Firm or Company | vame | | |
| Telephone Number (include a | rea code) | | LAW OFFICE OF E-Mail Address (11 | LAUREN A. COI | _BY | |
| (301)6631086 | <u></u> . | | LAC@LCOLBY.C | OM | | |
| If more than one transferor, stransferor. | | ion requested i | n questions 2 and 3 | for each | [Exhibit 4] | |
| 4. Changes in interests as a result | t of transfer. | <u>-</u> | | | | |
| <u>_</u> | | | | | | |
| Enter Changes in Interests Int | formation] | | | | | |
| | | | | | , | |
| 1 | Changes in | Interests as a l | Result of Transfer | | | |
| | | | | | | |
| (A) NAMES AND | (B) | | INTERE | ST HELD | | |
| ADDRESSES OF ANY | CITIZENSHIP | (C) BEFOR | E TRANSFER OR | | | |
| PARTY TO APPLICATION HOLDING AN | | ASSIGNMENT | | (D) AFTER TRANSFER OR ASSIGNMENT | | |
| ATTRIBUTABLE | | (1) Percentage | (2) Percentage Total | (1) Percentage Votes | V6V6 | |
| INTEREST | | Votes | Assets (Equity plus Debt) | (1) rescendinge votes | (2) Percentage Total Assets (Equity plus Debt) | |
| GERARD LUZ A. JAMES, | US | 51 | 5) | 0 | | |
| EST. 83 ANNA'S HOPE, | | | | U | U | |
| CHRISTIANSTED, ST. | |] | [| | | |
| CROIX, USVI 00822 | | ₽. | | | | |
| | | <u> </u> | <u></u> | | | |
| (A) NAMES AND | (8) | | | | | |
| (A) NAMES AND ADDRESSES OF ANY | (B) CITIZENSHIP | | INTERES | ST HELD | | |
| ADDRESSES OF ANY PARTY TO APPLICATION | (B) CITIZENSHIP | (C) BEFOR | INTERES E TRANSFER OR IGNMENT | OT HELD (D) AFTER TR ASSIGN | ANSFER OR MENT | |
| ADDRESSES OF ANY PARTY TO APPLICATION HOLDING AN | | (1) Percentage | E TRANSFER OR | (D) AFTER TR ASSIGN | MENT | |
| ADDRESSES OF ANY PARTY TO APPLICATION HOLDING AN ATTRIBUTABLE INTEREST | | ASS | E TRANSFER ÖR IGNMENT | (D) AFTER TR | MENT | |
| ADDRESSES OF ANY PARTY TO APPLICATION HOLDING AN ATTRIBUTABLE INTEREST ASTA K. JAMES, EST. 83 | | (1) Percentage | E TRANSFER OR IGNMENT (2) Percentage Total Assets (Equity plus Debt) | (D) AFTER TR ASSIGN (1) Percentage Votes | MENT (2) Percentage Total Assets (Equity plus Debt) | |
| ADDRESSES OF ANY PARTY TO APPLICATION HOLDING AN ATTRIBUTABLE INTEREST ASTA K. JAMES, EST. 83 ANNA'S HOPE. | CITIZENSHIP | (1) Percentage Votes | E TRANSFER OR IGNMENT (2) Percentage Total Assets (Equity plus Debt) | (D) AFTER TR ASSIGN | MENT (2) Percentage Total Assets (Equity plus | |
| ADDRESSES OF ANY PARTY TO APPLICATION HOLDING AN ATTRIBUTABLE INTEREST ASTA K. JAMES, EST. 83 ANNA'S HOPE, CHRISTIANSTED, ST. | CITIZENSHIP | (1) Percentage Votes | E TRANSFER OR IGNMENT (2) Percentage Total Assets (Equity plus Debt) | (D) AFTER TR ASSIGN (1) Percentage Votes | MENT (2) Percentage Total Assets (Equity plus Debt) | |
| ADDRESSES OF ANY PARTY TO APPLICATION HOLDING AN ATTRIBUTABLE INTEREST ASTA K. JAMES, EST. 83 ANNA'S HOPE. | CITIZENSHIP | (1) Percentage Votes | E TRANSFER OR IGNMENT (2) Percentage Total Assets (Equity plus Debt) | (D) AFTER TR ASSIGN (1) Percentage Votes | MENT (2) Percentage Total Assets (Equity plus Debt) | |
| ADDRESSES OF ANY PARTY TO APPLICATION HOLDING AN ATTRIBUTABLE INTEREST ASTA K. JAMES, EST. 83 ANNA'S HOPE, CHRISTIANSTED, ST. | CITIZENSHIP | (1) Percentage Votes | E TRANSFER OR IGNMENT (2) Percentage Total Assets (Equity plus Debt) | (D) AFTER TR ASSIGN (1) Percentage Votes | MENT (2) Percentage Total Assets (Equity plus Debt) | |
| ADDRESSES OF ANY PARTY TO APPLICATION HOLDING AN ATTRIBUTABLE INTEREST ASTA K. JAMES, EST. 83 ANNA'S HOPE, CHRISTIANSTED, ST. | CITIZENSHIP | (1) Percentage Votes | E TRANSFER OR IGNMENT (2) Percentage Total Assets (Equity plus Debt) | (D) AFTER TR ASSIGN (1) Percentage Votes | MENT (2) Percentage Total Assets (Equity plus Debt) | |
| ADDRESSES OF ANY PARTY TO APPLICATION HOLDING AN ATTRIBUTABLE INTEREST ASTA K. JAMES, EST. 83 ANNA'S HOPE, CHRISTIANSTED, ST. | CITIZENSHIP | (1) Percentage Votes | E TRANSFER OR IGNMENT (2) Percentage Total Assets (Equity plus Debt) | (D) AFTER TR ASSIGN (1) Percentage Votes | MENT (2) Percentage Total Assets (Equity plus Debt) | |

I certify that the statements in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge that all certifications and attached Exhibits are considered material

10

http://svartifoss2.fcc.gov/cgi-bin/ws..../cdbsmenu.hts?context=25&formid=315&appn=56403 5/8/2001

| Para and DOD A. MANES | Typed or Printed Title of Person Signing REPRESENTATIVE OF TRANSFERORS |
|--|--|
| Signature | Date 5/8/2001 |
| VIALE CONTRACTOR OF STREET STREET STREET | 0/0/2001 |

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

Section III - Licensee/Permittee

| Π | Certification. Licensee/permittee certifies that it has answered each question in this application based on its review of the application instructions and worksheets. Licensee | F Yes C No |
|------|--|--------------------------------|
| | constitutes its representation that the application satisfies each of the pertinent standards an eriteria set forth in the application instructions and worksheets. | d |
| 2 | Authorizations to be Assigned. List the authorized stations and construction permits to be assigned. Provide the Facility Identification Number and the Call Sign. or the Facility Identification Number and the File Number of the Construction Permit, and the location, for each station to be assigned. Include main stations, FM and/or TV translator stations, LPTV | |
| | stations, SCA, FM and/or TV booster stations, and associated auxiliary service stations. [Enter Station Information] | ** |
| | List the authorized stations and construction permits to be transferred. Provide the Facility Identification Number and the Call Sign, or the Facility Identification Number and the File Number of the Construction Permit, and the location, for each station to be transferred. Include main stations, FM and/or TV translator stations, LPTV stations, SCA, FM and/or T booster stations, and associated auxiliary service stations. | 1) |
| | Facility ID Call Sign or Construction Permit File Number City State Number CHRISTIAN STEDIVI | |
| | 20589 WSTX - CHRISTIANSTED VI | |
| | Facility ID Call Sign or Construction Permit File Number City State | |
| | 20601 WSTX | |
| 1 | | |
| 7. | Agreements to Transfer Control of Station. Licensee/permittee certifies that: a. it has placed in its public inspection file(s) and submitted an an exhibit to this item copies of all agreements to transfer control of the station(s); | € Yes C No |
| | b. these documents embody the complete and final understanding between transferor(s) and transferee(s); and | See Explanation in [Exhibit 6] |
| | c. these agreements comply fully with the Commission's rules and policies. Exhibit Required | |
| - 13 | Other Authorizations. List call signs, locations and facility identifiers of all other broadcas stations in which licensee/permittee or any party to the application has an attributable interest. | V N/A |
| 5. | Character Issues. Licensee/permittee certifies that neither licensee/permittee nor any party | [Exhibit 7] |
| | po the application has of has had any interest in, or connection with: | C Yes 6 No |
| j | a. any broadcast application in any proceeding where character issues were left unresolved or were resolved adversely against the applicant or any party to the application; or b. any pending broadcast application in which characters are left unresolved. | See Explanation in [Exhibit 8] |
| _ [| b. any pending broadcast application in which character issues have been raised. | (EVIIIOII 0) |

| 6. Adverse Findings. Licensee/permittee certifies that, with respect to the licensee/permit and each party to the application, no adverse finding has been made, nor has an adverse action been taken by any court or administrative body in a civil or criminal proceeding brought under the provisions of any law selected. | final Yes No |
|---|---------------------------------|
| brought under the provisions of any law related to any of the following: any felony; maintenance antitrust or unfair competition; fraudulent statements to another government; or discrimination. | ental [Exhibit 9] |
| 7. Local Public Notice. Licensee/permittee certifies that it has or will comply with the put notice requirements of 47 C.F.R. Section 73.3580. | Yes No |
| 8. Auction Authorization. Licensee/permittee certifies that more than five years have passisince the issuance of the construction permit for the station being assigned, where that p was acquired in an auction through the use of a bidding credit or other special measure | ermit C Yes C No |
| | See Explanation in [Exhibit 10] |
| 9. Anti-Drug Abuse Act Certification. Licensee/permittee certifies that neither licensee/permittee nor any party to the application is subject to denial of federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862. | |

I certify that the statements in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge that all certifications and attached Exhibits are considered material representations.

| Typed or Printed Name of Person Signing BARBARA JAMES-PETERSEN | Typed or Printed Title of Person Signing PRESIDENT |
|--|--|
| Signature | Date |
| | 5/8/2001 |
| WILLFUL FALSE STATEMENTS ON THIS FOR | M ARE PUNISHABLE BY FINE AND/OR DARPUS ON DOLLAR |

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

Section IV - Transferee(s)

| Π. | Certification. Transferee(s) certify that it (they) have application based on its (their) review of the application Transferee(s) further certify that where it (they) have below, this certification constitutes its (their) represent each of the pertinent standards and criteria set forth it worksheets. | made an affirmative certification |
|----|---|---|
| 2. | | Zip Code 00822 - |
| - | l elephone Number (include area code) (340)7730390 | (if available) |
| 3. | Contact Representative (if other than transferee) LAUREN A. COLBY, ESQ. Telephone Number (include area code) (301)6631086 | Firm or Company Name LAW OFFICE OF LAUREN A. COLBY E-Mail Address (if available) LAC@LCOLBY.COM |
| | If more than one transferee, submit the information retransferee. | equested in questions 2 and 3 for each [Exhibit 11] |

(2

http://svartifoss2.fcc.gov/cgi-bin/ws..../cdbsmenu.hts?context=25&formid=315&appn=56403 5/8/2001

| Nature of Applicant. Each transfer | | | | | | |
|--|--|--|---|---|--|--|
| an individual | C a general part | nership | C a for-profit of | ODOration | | |
| C a limited partnership | C a not-for-profi | | C a limited lial | oility company | | |
| C other | | | (LLC/LC) | | | |
| a. If "other", describe nature of | Exhibit 12 | | <u> </u> | | | |
| transferee in an Exhibit. | [EXIION 12] | | | | | |
| Agreements to Transfer Control o | Station Transferes | Cartifica the | | | | |
| a. ihe written agreements in the li to the Commission embody the station(s) specified in Section I b. these agreements comply fully | censee/permittee's pu complete and final a II, question 2; and | iblic inspection file agreement to transfe | r control of the | E Yes C No [Exhibit 13] | | |
| Exhibit Required | with the Commission | is rules and policies | S. | | | |
| Parties to the Application. a. List each transferee, and, if other interests, non-insulated partners | | | | | | |
| in any transferee, list separately partners and/or members. Create necessary. (1) Name and address of the taparty to the application ho | its officers, directors e a separate row for e ransferee and each (lding an | s, stockholders with each individual or er (2) Citizenship. | mership holds an attributable intere utity. Attach addit | attributable interes sts. non-insulated ional pages if | | |
| attributable interest (if oth also show name, address a natural person authorized holding the attributable int transferee first, officers ne and, thereafter, remaining | attributable interest (if other than individual also show name, address and citizenship of natural person authorized to vote the stock or holding the attributable interest). List the transferee first, officers next, then directors and, thereafter, remaining stockholders and | | | | | |
| other entities with attribute | ible interests, and | 5) Percentage of t | total assets (equity | plus debt). | | |
| partners. [Enter Parties/Owners Information | ible interests, and | 5) Percentage of t | total assets (equity | / plus debt). | | |
| partners. | on] | 5) Percentage of to | total assets (equity | / plus debt). | | |
| List each transferee, and, if other interests, non-insulated partners in any transferee, list separately partners and/or members. Create (1) Name and address of the transferee. | 6a. Parties to than a natural person and/or members. If a is officers, directors, a separate row for ea | n, its officers, direct corporation or part stockholders with a ach individual or en | tors, stockholders nership holds an a attributable interes tity. | with attributable attributable interest sts, non-insulated | | |
| List each transferee, and, if other interests, non-insulated partners in any transferee, list separately partners and/or members. Create (1) Name and address of the tran other than individual also show ror holding the attributable interest remaining stockholders and other (2) Citizenship. | 6a. Parties to than a natural person and/or members. If a its officers, directors, a separate row for ea sferee and each party lame, address and cit; t) List the transferee r entities with attribut | o the Application n, its officers, direct corporation or parts stockholders with a stockholders with a sch individual or entro the application lizenship of natural effirst, officers next, table interests, and parts of the application of the | tors, stockholders nership holds an a attributable interes tity, nolding an attribu person authorized then directors an partners. | with attributable attributable interest sts, non-insulated table interest (if to vote the stock d, thereafter, | | |
| List each transferee, and, if other interests, non-insulated partners in any transferee, list separately partners and/or members. Create (1) Name and address of the tran other than individual also show ror holding the attributable interestemaining stockholders and other (2) Citizenship. (3) Positional Interest: Officer, diattributable under the Commission (4) Percentage of total assets (equ | 6a. Parties to than a natural person and/or members. If a its officers, directors, a separate row for ea sferee and each party name, address and cit; the transferee or entities with attribut irector, general partne irector, general partne ires equity/debt plus | o the Application n, its officers, direct corporation or parts stockholders with a stockholders with a sch individual or entro the application lizenship of natural effirst, officers next, table interests, and parts of the application of the | tors, stockholders nership holds an a attributable interes tity, nolding an attribu person authorized then directors an partners. | with attributable attributable interest sts, non-insulated table interest (if to vote the stock d, thereafter, | | |
| List each transferee, and, if other interests, non-insulated partners in any transferee, list separately partners and/or members. Create (1) Name and address of the tran other than individual also show ror holding the attributable interestemaining stockholders and other (2) Citizenship. (3) Positional Interest: Officer, diattributable under the Commission (4) Percentage of votes. (5) Percentage of total assets (equal transfer of the commission (1) Name and Address | 6a. Parties to than a natural person and/or members. If a its officers, directors, a separate row for ea saferee and each party lame, address and cit; of). List the transferee or entities with attribut irector, general partne on's equity/debt plus aity plus debt) (2) Citizen | o the Application n, its officers, direct corporation or particular stockholders with a sch individual or ender to the application lizenship of natural perfirst, officers next, table interests, and per, limited partner, listandard, etc. | tors, stockholders nership holds an a attributable interes tity. nolding an attribu person authorized then directors an partners. | with attributable attributable interest sts, non-insulated table interest (if to vote the stock d, thereafter, estor/creditor age (5) Percentage of total assets (equity plus | | |
| List each transferee, and, if other interests, non-insulated partners in any transferee, list separately partners and/or members. Create (1) Name and address of the tran other than individual also show ror holding the attributable interestemaining stockholders and other (2) Citizenship. (3) Positional Interest: Officer, diattributable under the Commission (4) Percentage of total assets (equ | 6a. Parties to than a natural person and/or members. If a its officers, directors, a separate row for ea sferee and each party tame, address and cit st). List the transferee r entities with attribut irector, general partne | o the Application n, its officers, direct corporation or particles stockholders with a sch individual or envito the application lizenship of natural effect, officers next, table interests, and per, limited partner, I standard, etc. | tors, stockholders nership holds an a attributable interes tuty. nolding an attribu- person authorized then directors an partners. LLC member, inv (4) Percent of Votes | with attributable interest sts, non-insulated table interest (if to vote the stock d, thereafter, estor/creditor | | |
| List each transferee, and, if other interests, non-insulated partners in any transferee, list separately partners and/or members. Create (1) Name and address of the tran other than individual also show or holding the attributable interestemaining stockholders and other (2) Citizenship. (3) Positional Interest: Officer, diattributable under the Commission (4) Percentage of votes. (5) Percentage of total assets (equal partners and Address (1) Name and Address (2) Name and Address (3) Partnerships (4) Percentage of total assets (equal partnerships (4) Name and Address (5) Percentage of total assets (equal partnerships (5) Percentage (1) Name and Address (2) Partnerships (3) Partnerships (4) Percentage (4) Name and Address (4) Name and Address (4) Name and Address (5) Percentage (5) Percentage (6) Name and Address (6) Name and | 6a. Parties to than a natural person and/or members. If a its officers, directors, a separate row for ea sferee and each party tame, address and cit st). List the transferee r entities with attribut irector, general partne | n, its officers, direct corporation or particular stockholders with a sch individual or entropy to the application lizenship of natural effirst, officers next, table interests, and partner, limited partner, listandard, etc. (3) Position Interest | tors, stockholders nership holds an a attributable interes tuty. nolding an attribu- person authorized then directors an partners. LLC member, inv (4) Percent of Votes | with attributable attributable interest sts, non-insulated table interest (if to vote the stock d, thereafter, estor/creditor age (5) Percentage of total assets (equity plus debt). | | |
| List each transferee, and, if other interests, non-insulated partners in any transferee, list separately partners and/or members. Create (1) Name and address of the tran other than individual also show ror holding the attributable interestemaining stockholders and other (2) Citizenship. (3) Positional Interest: Officer, dattributable under the Commission (4) Percentage of votes. (5) Percentage of total assets (equal to the company of t | 6a. Parties to than a natural person and/or members. If a its officers, directors, a separate row for ea sferee and each party name, address and cit st). List the transferee r entities with attribut irector, general partne | n, its officers, direct corporation or parts stockholders with a sch individual or en to the application lizenship of natural effect, officers next, table interests, and per, limited partner, I standard, etc. Ship (3) Position Interest | tors, stockholders nership holds an a attributable interes tity, nolding an attribu person authorized then directors an partners. LLC member, inv (4) Percent of Votes | with attributable attributable interest sts, non-insulated table interest (if to vote the stock d, thereafter, estor/creditor age (5) Percentage of total assets (equity plus debt). | | |
| List each transferee, and, if other interests, non-insulated partners in any transferee, list separately partners and/or members. Create (1) Name and address of the tran other than individual also show or holding the attributable interestemaining stockholders and other (2) Citizenship. (3) Positional Interest: Officer, diattributable under the Commission (4) Percentage of votes. (5) Percentage of total assets (equal partners and Address (1) Name and Address (2) Name and Address (3) Partnerships (4) Percentage of total assets (equal partnerships (4) Name and Address (5) Percentage of total assets (equal partnerships (5) Percentage (1) Name and Address (2) Partnerships (3) Partnerships (4) Percentage (4) Name and Address (4) Name and Address (4) Name and Address (5) Percentage (5) Percentage (6) Name and Address (6) Name and | 6a. Parties to than a natural person and/or members. If a its officers, directors, a separate row for ea sferee and each party name, address and cit; ot). List the transferee r entities with attribut irector, general partne irector, general partn | n, its officers, direct corporation or part stockholders with a sch individual or en izenship of natural first, officers next, table interests, and per, limited partner, standard, etc. Ship (3) Position Interest | tors, stockholders nership holds an a attributable interes tity, holding an attribu- person authorized then directors an partners. LLC member, inv (4) Percent of Votes | with attributable interest sts, non-insulated table interest (if to vote the stock d, thereafter, estor/creditor age (5) Percentage of total assets (equity plus debt). | | |

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| H | 14K, BRONX, NY 10456 | الــــــــــــــــــــــــــــــــــــ | | h | | _ |
|--------------|--|--|---|-----------------|--------------|---|
| | (1) Name and Address | (2) Citizenship | (3) Positional | (4) Pe | rcentage | (5) Percentage |
| | | | Interest | of | Votes | of total assets (equity plus debt). |
| | GERARD LUZ A. JAMES, II, 7H CATHERINES REST, CHRISTIANSTED, ST. CROIX, USVI 00820 | US | VICE PRESIDENT/DIRECTOR | 21 | | 21 |
| | (1) Name and Address | (2) Citizenship | (3) Positional | (4) Per | centage | (5) Percentage |
| | | | Interest | of V | otes | of total assets (equity plus debt). |
| | KELSEY G. JAMES, M.D., 1539 DEBATTISTA PLACE, NEW ORLEANS, LA 70131 | ÜŠ | SECRETARY/DIRECTOR | 21 | | 21 |
| | b. Applicant certifies that equity interests no | st set forth above | re non arributable | | | |
| | The second secon | A SET TOTAL ABOVE | are non-attributable. | | • | Yes C No |
| | | | | | | C _{N/A} |
| | | | | | | Explanation in Exhibit 15] |
| | Other Authorizations. List call signs, location broadcast stations in which transferee or any painterest. | s, and facility ide uty to the applica- | ntifiers of all other tion has an attributat | le | | ☑ N/A |
| 8. | Multiple Ownership. | | | | [Exhibit 16] | |
| | a. Transferee certifies that the proposed transfe | | E | Yes C No | | |
| | complies with the Commission's multiple does not present an issue under the Comm does not present an issue under the Comm of immediate family members; | ission's cross-inte | rest policy: | rests | See E | xplanation in xhibit 17] |
| | 4. complies with the Commission's policies r 5. complies with the Commission's restriction participation of non-party investors and cr | ns relating to the | ownership interests; insulation and non- | and | | |
| | b.Radio Applicants Only. If the transfer of the s community service contour overlaps, see Loca applicant certifies that all relevant information and submitted to the Commission. | al Radio Ownerch | in Workshoot Overs | 1 | С | Yes C No |
| | and submitted to the Commission. | | | | | ⊙ _{N/A} |
| <i>I</i> O . | Character Issuer Tonata | | | | See E [E | xplanation in xhibit [8] |
| , · | Character issues. Transferee certifies that neith application has or has had any interest in, or con | inection with: | | | િ | Yes C No |
| | a. any broadcast application in any proceeding or were resolved adversely against the applic b. any pending broadcast application in which c | ant or any party t character issues h | o the application; or ive been raised. | | | xplanation in xhibit 19] |
| 10. | Adverse Findings. Transferee certifies that, with the application, no adverse finding has been mad taken by any court or administrative body in a court of a | de norhas an adv | erce final action has | _ 1 | િ | Yes C No |
| | taken by any court or administrative body in a ci the provisions of any law related to any of the fo antitrust or unfair competition; fraudulent statem discrimination. | ollowing; any felo nents to another g | ny; mass media-rela overnmental unit; or | ted | See E | xplanation in xhibit 20] |
| | Alien Ownership and Control. Transferee certi Section 310 of the Communications Act of 1934 and foreign governments. | ities that it compi , as amended, rel | ies with the provision ating to interests of a | ns ol iliens | િ | Yes C No |
| | | | | | | xplanation in |

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| 12. | Financial Qualifications. Transferee certifies that sufficient net liquid assets are on hand or are available from committed sources to consummate the transaction and operate the station (s) for three months. | € Yes C No |
|-----|---|------------------------------------|
| 13. | Program Service Certification. Transferee certifies that it is cognizant of and will comply with its obligations as a Commission licenses to the service of | See Explanation in [Exhibit 22] |
| | issues of public concern facing the station's community of license and service area | € Yes C No |
| 14 | Auction Authorization. Transferee certifies that where less than five years have passed since the issuance of the construction permit and the permit had been acquired in an auction through the use of a bidding credit or other special measure, it would qualify for such credit or other special measure. | C Yes C No |
| | | € _{N/A} |
| 5.1 | Anti-Drug Abuse Act Certification. Licensee/permittee certifies that neither | See Explanation in [Exhibit 23] |
| | pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862 | € Yes C No |
| ٥. | EEO. Does the applicant propose to employ five or more full-time employees? | C Yes © No |
| | If the answer is Yes, the applicant must include an EEO program called for in the separate Model EEO Program Report (FCC Form 396-A) | |

I certify that the statements in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge that all certifications and attached Exhibits are considered material representations. I hereby waive any claim to the use of any particular frequency as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and request an authorization in accordance with this application. (See Section 304 of the Communications Act of 1934, as amended.)

| Typed or Printed Name of Person Signing BARBARA JAMES-PETERSEN | Typed or Printed Title of Person Signing REPRESENTATIVE OF TRANSFEREES | | | | |
|--|--|--|--|--|--|
| Signature | Date 5/8/2001 | | | | |

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

Exhibits

Exhibit 1

Description: RESPONSE TO SECTION I, #4

SECTION III, #5 IS BEING REVISED AND EXHIBIT 8 IS BEING ADDED.

Exhibit 4

Description: TRANSFERORS

GERARD LUZ A. JAMES, EST. 83 ANNA'S HOPE, CHRISTIANSTED, ST. CROIX, USVI 00822

ASTA K. JAMES, EST. 83 ANNA'S HOPE, CHRISTIANSTED, ST. CROIX, USVI 00822

Exhibit 6

Description: AGREEMENTS

THE COMMISSION HAS ISSUED AN ORDER TO SHOW CAUSE, DIRECTING FAMILY BROADCASTING, INC., TO SHOW CAUSE WHY THE LICENSES FOR AM BROADCAST STATION WSTX AND FM BROADCAST STATION WSTX-FM SHOULD NOT BE REVOKED

HERETOFORE, LUZ JAMES, THE MAJORITY SHAREHOLDER, HAS HANDLED ALL OF THE COMPANY'S AFFAIRS RELATING TO THE FCC. IN A DECLARATION, FILED WITH THE PETITION FOR

http://svartifoss2.fcc.gov/cgi-bin/ws..../cdbsmcnu.hts?context=25&formid=315&appn=56403 5/8/2001

RECONSIDERATION ON MARCH 14, 2001, MR. JAMES HAS ACKNOWLEDGED THAT CERTAIN STATEMENTS HE MADE TO THE COMMISSION WERE NOT ACCURATE AND THAT THE STATIONS ARE NOT IN FULL COMPLIANCE WITH COMMISSION RULES AND REGULATIONS TO CORRECT THAT PROBLEM, MR. JAMES HAS ALREADY RESIGNED AS PRESIDENT AND A DIRECTOR OF THE COMPANY. BY THIS APPLICATION, MR. JAMES AND HIS WIFE PROPOSE TO GIFT THEIR STOCK TO THEIR CHILDREN, NONE OF WHOM WERE INVOLVED IN ANY OF THE ALLEGED WRONGDOING.

Exhibit 8

Description: RESPONSE TO SECTION III, #5

INITIALLY, WHEN THIS TRANSFER OF CONTROL APPLICATION WAS FILED, THE LICENSEE/PERMITTEE ACCOMPANIED THE APPLICATION WITH AN EXHIBIT (EXHIBIT 6), STATING THAT THE PURPOSE OF THE APPLICATION WAS, IN SUBSTANCE, TO RESOLVE THE CHARACTER ISSUES SPECIFIED AGAINST THE PERMITTEE IN THE PENDING PROCEEDING IN EB DOCKET NO. 01-39, WHICH IS A PROCEEDING TO THE PERMITTEE IN THE PENDING PROCEEDING IN EB DOCKET NO. 01-39, WHICH IS A PROCEEDING IN COMMENTS TO THE PERMITTEE IN THE PENDING PROCEEDING IN EB DOCKET NO. 01-39, WHICH IS A PROCEEDING IN COMMENTS TO THE PERMITTEE IN THE PENDING PROCEEDING IN COMMENTS TO THE PERMITTEE IN THE PERMITTEE IN THE PERMITTEE IN THE PENDING PROCEEDING IN COMMENTS TO THE PERMITTEE IN THE PERMITTEE LOOKING TOWARDS THE REVOCATION OF THE LICENSES'S LICENSES. THE LICENSEE ANSWERED QUESTION 5 PERTAINING TO CHARACTER ISSUES 'YES', MEANING THAT THERE WERE NO UNRESOLVED CHARACTER ISSUES PENDING AGAINST THE LICENSEE IN ANY PROCEEDING, EXCEPT THE ONE FULLY DESCRIBED IN EXHIBIT 6

THE LICENSEE AND ITS COUNSEL HAVE CONSIDERED THIS MATTER AND BELIEVE IT WOULD HAVE BEEN BETTER TO ANSWER QUESTION 5 IN THE NEGATIVE, EXPLAINING THAT CHARACTER ISSUES ARE PENDING AGAINST THE LICENSEE IN EB DOCKET NO. 01-39, BUT THAT THERE ARE NO OTHER SUCH UNRESOLVED ISSUES STEMMING FROM ANY OTHER COMMISSION PROCEEDING IN THE PAST.

Exhibit 11

Description: TRANSFEREES

BARBARA JAMES-PETERSEN, P.O. BOX 34, CHRISTIANSTED, ST. CROIX, USVI 00821-0034

GERARD LUZ A. JAMES, II, P.O. BOX 4617, CHRISTIANTSTED, ST. CROIX, USVI 00822-4617

EMMETH C. JAMES, 540 E. 169TH STREET, APT. 14K, BRONX, NY 10456

KELSEY GERARD JAMES, M.D., 1539 DE BATTISTE PLACE, NEW ORLEANS, LA 70131

Exhibit 13

Description: AGREEMENTS

SEE EXHIBIT 6

Exhibit 14

Description: PERCENTAGES

THE ACTUAL PERCENTAGES FOR EACH OF THE FOUR TRANSFEREES SHOULD BE 20.75 HOWEVER, THE CHART WOULD NOT ACCOMMODATE THAT FIGURE, SO THE PERCENTAGES SHOWN ON THE CHART

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http://svartifoss2.fcc.gov/cgi-bin/ws..../cdbsmenu.hts?context=25&formid=315&appn=56403 5/8/2001

FCC MMB - CDBS Electronic Filing Application Reference Number: 20010315AAJ Successfully filed at May 8 2001 4:27PM

(t.)

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| | deral Communications Con ashington, D.C. 20554 | | Approved by OMB 060-0010 (September 2000) | FOR FCC USE ONLY | | | |
|--|---|--|--|---|---------------------|--|--|
| | | FCC 323 | • | | | | |
| | | P REPORT FOR COM OADCAST STATION | | FOR COMMISSION USE ONLY FILE NO - 20011001ACT | | | |
| L | Read INST | RUCTIONS Before Filling (| Out Form | | | | |
| Se | ction I - General Iní | formation | | | | | |
| 1. | Legal Name of the I | | | | | | |
| | Mailing Address P.O. BOX 3279 | | | | | | |
| | City CHRISTIANSTED | , ST. CROIX | State or Country (if VI | foreign address) | ZIP Code 00822 - | | |
| | Telephone Number (include area code) 3407730390 | | E-Mail Address (if available) | | | | |
| | | | Facility ID Number 20589 | | Call Sign WSTX | | |
| 2. | Contact Represental LAUREN A. COLE | tive (if other than Licensee/F BY, ESQ. | Permittee) | Firm or Company Name LAW OFFICE OF LAUREN A. | COLBY | | |
| | Telephone Number 3016631086 | (include area code) | | E-Mail Address (if available) LAC@LCOLBY.COM | | | |
| 3. | Name of entity, if o | ther than licensee or permitt | ee, for which report is | s filed | | | |
| | Mailing Address | | | | | | |
| | City | State or Country (if foreign address) | ZIP Code - | | | | |
| Telephone E-Mail Address (if available) Number (include area code) | | | | | | | |
| 4. | 4 * | as been submitted without a intity C Fee-exempt Report | | or fee exemption (see 47 C.F.R. S | Section 1.1114): | | |

Section II - Ownership Information

| 5. | . a | Œ | Biennial | b. C | Transfer of Control or Assignment of License/Permit | c. C | Other | | |
|----|-----|-------|-----------------------|-------------|---|-------------|-------|--|--|
| | fe | or th | e following stations: | · | | | ř | | |

| Official Exhibit, No. | (GC, Board, Party) | Identified | Received | of wad astrus | Pess: Reporter: | | | |
|-----------------------|--------------------|------------------|-------------|-------------------|-----------------|------------|--|--|
| Case No. Ol- 227 | | Disposition: Ide | Rejected Re | IN THE MATTER OF. | Date: Witness: | Vn. Pages. | | |

| | [Enter Station Information] | | | | | | | | |
|-----------------|---|---|---|---------------------|-------------------------------------|----------------|-------------------|--|--|
| | | | Station 1 | List | | | | | |
| | This Report is filed for | the following station | as: | | | | | | |
| | Call Letters | Facility ID Nu | mber | Location (Cit | y/State) | Class of | service | | |
| | WSTX | 20589 | CHRISTIA | NSTED VI | | AM | | | |
| | | | | · | | | | | |
| | Call Letters | Facility ID Nu | nber | Location (Cit | v/State) | Class of | service | | |
| | WSTX-FM | 20601 | CHRISTIA | NSTED VI | | FM | | | |
| | | | | | | | | | |
| | All of the information 73.3615(a), i.e., in | formation must be ci | | s of filing of this | | | | | |
| | | | ina Report is fried | or (theth one) | | | | | |
| 6. | Respondent is: Sole proprietorship For-profit corporat If "Other", describe na | ion C Ge | t-for-profit corporat neral partnership it in an Exhibit. | ion C Lii C Ot | mited partnership her [Exhibi | t 1] | | | |
| 7. | List all contracts and other instruments required to be filed by 47 C.F.R. Section 73.3613. (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise exercises de facto control over the subject licensee or permittee shall respond.) [Enter Contract/Instrument Information] | | | | | | | | |
| | | with the state of | | | | | | | |
| 8. | Capitalization (Only lie facto control over the s | • | | | interest in or that ot | herwise exe | rcises <u>d</u> e | | |
| | [Enter Capitalization II | nformation] | | | | | | | |
| | Capitalization | | | | | | | | |
| | Capitalization (Only licensees, permittees, or a reporting entity with a majority interest in or that otherwise excercises de <u>facto</u> control over the subject licensee or permittee shall respond.) | | | | | | | | |
| | Class of stock (pref | erred common or | Voting or Non- | | Number of Sha | ıres | | | |
| | othe | | voting of Non- | Authorized | Issued and Outstanding | Treasury | Unissued | | |
| | COMN | MON | VOTING | 100000 | 2771 | | 97229 | | |
| | | | | | | | | | |
| - 9. | (a.) List the responden | t, and, if other than a | natural person, its | officers, director | s, stockholders and | other entitie | s with | | |
| | attributable interes | ts, non-insulated par | tners and/or membe | rs. If a corporati | on or partnership ho | olds an attrib | outable | | |

interest in the respondent, list separately its officers, directors, stockholders and other entities with attributable interests, non-insulated partners and/or members. Create a separate row for each individual or entity. Attach supplemental pages, if necessary.

[Enter Owner Information]

Owner Information

List the respondent, and, if other than a natural person, its officers, directors, stockholders and other entities with attributable interests, non-insulated partners and/or members. If a corporation or partnership holds an attributable interest in the respondent, list separately its officers, directors, stockholders and other entities with attributable interests, non-insulated partners and/or members. Create a separate row for each individual or entity. Attach supplemental pages, if necessary.

(Read carefully - The numbered items below refer to line numbers in the following table.)

- 1. Name and address of respondent and each party to the respondent holding an attributable interest (if other than individual also show name, address and citizenship of natural person authorized to vote the stock or holding the attributable interest). List the respondent first, officers next, then directors and, thereafter, remaining stockholders and other entities with attributable interests, and partners.
- 2. Gender (male or female).
- 3. Ethnicity (check one).
- 4. Race (select one or more).
- 5. Citizenship.
- 6. Positional interest: Officer, director, general partner, limited partner, LLC member, investor/creditor attrubutable under the Commission's equity/debt plus standard, etc.
- 7. Percentage of votes.
- 8. Percentage of total assets (equity debt plus).

| 1. Name and Address | GERARD LUZ A. JAMES, EST. 83 ANNA'S HOPE, CHRISTIANSTED, ST. CROIX, USVI 00822 |
|--|---|
| 2. Gender (male or female) | Male C Female |
| 3. Ethnicity (check one) | C Hispanic or Latino Not Hispanic or Latino |
| 4. Race (select one or more) | C American Indian or Alaska Native C Asian Black or African American C Native Hawaiian or Other Pacific Islander C White |
| 5. Citizenship | us |
| 6. Positional Interest | NA |
| 7. Percentage of votes | 51 |
| 8. Percentage of total assets (equity debt plus) | 51 |
| | |
| 1. Name and Address | ASTA K. JAMES, EST. 83 ANNA'S HOPE, CHRISTIANSTED, ST. CROIX, USVI 00822 |
| 2. Gender (male or female) | C Male Female |
| 3. Ethnicity (check one) | Hispanic or Latino Not Hispanic or Latino |
| | |

| Race (select one or more) | C American Indian or Alaska Native |
|--|---|
| | C Asian |
| | Black or African American |
| | C Native Hawaiian or Other Pacific Islander |
| | C White |
| . Citizenship | US |
| . Positional Interest | NA |
| . Percentage of votes | 42 |
| B. Percentage of total assets equity debt plus) | 42 |
| . Name and Address | BARBARA JAMES-PETERSEN, EST. 83 ANNA'S HOPE, |
| | CHRISTIANSTED, ST. CROIX, USVI 00822 |
| 2. Gender (male or female) | C Male |
| | € Female |
| 3. Ethnicity (check one) | C Hispanic or Latino |
| • | Not Hispanic or Latino |
| 4. Race (select one or more) | C American Indian or Alaska Native |
| (DDIOUT ON OF HIOTO) | C Asian |
| | Asian Black or African American |
| | Black or African American Native Hawaiian or Other Pacific Islander |
| | |
| C (2):- | US White |
| 5. Citizenship | PRESIDENT/DIRECTOR |
| 6. Positional Interest | |
| 7. Percentage of votes | |
| 8. Percentage of total assets (equity debt plus) | [|
| <u> </u> | |
| 1. Name and Address | GERARD LUZ A. JAMES, II. 7H CATHERINE'S REST, CHRISTIANSTED |
| | ST. CROIX, USVI 00820 |
| 2. Gender (male or female) | € Maie |
| | C Female |
| 3. Ethnicity (check one) | C Hispanic or Latino |
| | Not Hispanic or Latino |
| 4. Race (select one or more) | C American Indian or Alaska Native |
| T. Nace (Sciect one of more) | |
| | C Asian |
| | Black or African American C Native Hamping or Other Pacific Islander |
| | Native Hawaiian or Other Pacific Islander |
| | C White |
| 5. Citizenship | US DIRECTOR |
| 6. Positional Interest | DIRECTOR |
| 7. Percentage of votes | |
| 8. Percentage of total assets (equity debt plus) | |
| I N | EMMETH C. JAMES, 540 E. 169TH STREET, APT, 14K, BRONX, NY 104 |
| 1. Name and Address | DIMINETTI C. WANTED, 540 E. 107 III O'REDA, M. 1 TR. BROWNER I' I'V |
| • | |

| 2. Gender (male or female) | Male Male | |
|---|--|-----------------------------|
| | C Female | |
| 3. Ethnicity (check one) | C Hispanic or Latino | |
| | Not Hispanic or Latino | |
| 4. Race (select one or more) | C American Indian or Alaska Native | |
| | C Asian | |
| | Black or African American | |
| | Native Hawaiian or Other Pacific Islander | |
| | C White | |
| 5. Citizenship | US | |
| 6. Positional Interest | DIRECTOR | |
| 7. Percentage of votes | 0 | |
| 8. Percentage of total assets | 0 | |
| (equity debt plus) | | |
| | | |
| 1. Name and Address | KELSEY G. JAMES, 1539 DEBATTISTA PLACE, NEW | ORLEANS, LA |
| D. Condon (male on female) | 70131 | |
| 2. Gender (male or female) | Male | |
| | C Female | |
| 3. Ethnicity (check one) | C Hispanic or Latino | |
| | Not Hispanic or Latino | |
| 4. Race (select one or more) | C American Indian or Alaska Native | |
| | C Asian | |
| | Black or African American | |
| | C Native Hawaiian or Other Pacific Islander | |
| | C White | |
| 5. Citizenship | US | |
| 6. Positional Interest | DIRECTOR | |
| 7. Percentage of votes | 0 | |
| 8. Percentage of total assets | 0 | |
| (equity debt plus) | | |
| | | |
| vinitani ziki. Akilikus Viliair - manna amun zamun azam azam azam kalinitzi - i - i i i i i i i i i i i i i i i | | |
| | and financial interests not set forth in response to Question 9 | C Yes C No |
| (a) are non-attributable. | | _ |
| | | € _{N/A} |
| | | |
| | | See Explanation [Exhibit 2] |
| Is the respondent or any party h | olding an attributable interest in the respondent also the | C Yes No |
| holder of an attributable interest | in any other broadcast station or in any cable or newspaper | Yes No |
| entities in the same market or w | ith overlapping signals in the same broadcast service, as | |
| described in 47 C.F.R. Sections | | FD 1217.67 |
| If "Yes", submit an Exhibit ider | tifying the holder of that other attributable interest, listing the | [Exhibit 3] |
| the nature and size of the owner | es identifiers of such other broadcast stations, and describing ship interest and the positions held in the other broadcast, | |
| cable or newspaper entities. | surp ministration in production and in the control of outdoor, | |
| Are any of the individuals listed | in response to Question 9(a) related as parent-child, | € Yes C No |
| husband-wife, brothers and siste | ers? | <u></u> |
| a contract of the contract of | | - |

| | | If "Yes", submit an Exhibit setting forth full information as to the family relationship | [Exhibit 4] |
|---|-----|---|-------------|
| | | Is respondent seeking an attribution exemption for any officer or director with duties unrelated to the licensee or permittee? | C Yes © No |
| | | If "Yes", submit an Exhibit identifying that individual by name and title, fully describing that individual's duties and responsibilities, and explaining why that individual should not be | [Exhibit 5] |
| Ш | Ц., | attributed an interest. | |

SECTION III - CERTIFICATION

I certify that I am PRESIDENT

(Official Title)

of FAMILY BROADCASTING, INC.

(Exact legal title or name of respondent)

and that I have examined this Report and that to the best of my knowledge and belief, all statements in this Report are true, correct and complete.

(Date of certification must be within 60 days of the date shown in Question 5, Section II and in no event prior to that date.)

| Signature | Date |
|---|-----------|
| BARBARA JAMES-PETERSEN | 10/1/2001 |
| Telephone Number of Respondent (Include area code) 3407730390 | |

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

Exhibits

Exhibit 2

Description: OWNERSHIP AND CAVEAT

SEVEN PERCENT OF THE STOCK OF FAMILY BROADCASTING, INC., IS HELD BY 42 VARIOUS OTHER PERSONS.

CAVEAT

THIS REPORT HAS BEEN PREPARED AT THE DIRECTION OF THE COMPANY'S PRESIDENT, BARBARA JAMES-PETERSEN, ON THE BASIS OF INFORMATION PROVIDED BY HER FATHER, THE FORMER PRESIDENT, LUZ JAMES. IT IS BELIEVED TO BE SUBSTANTIALLY ACCURATE BUT, BECAUSE OF THE POOR CONDITION OF CERTAIN RECORDS, IT MAY NOT BE COMPLETELY ACCURATE. IT DOES, HOWEVER, REPRESENT THE BEST INFORMATION AVAILABLE TO MRS. JAMES-PETERSEN.

Exhibit 4

Description: FAMILY RELATIONSHIPS

GERARD LUZ A. JAMES AND ASTA K. JAMES ARE HUSBAND AND WIFE AND THE PARENTS OF BARBARA

http://svartifoss2.fcc.gov/cgi-bin/ws.exe/prod/cdbs/forms/prod/cdbsmenu.hts?context=25&1. 10/1/2001

JAMES-PETERSEN, GERARD LUZ A. JAMES, II, EMMETH C. JAMES AND KELSEY G. JAMES, BROTHERS AND SISTER.

Remittance ID:165653 Authorization Number:001549 -- Successful Authorization -- FILE COPY ONLY! --

| CAREFULLY BEFORE | | TTANCE A | | API | PROVED BY OMB 3060-058 | |
|------------------------------|---------------------------------------|-------------------------|----------------------------|----------------|---------------------------------------|--|
| ROCEEDING PAGE NO OF | | | | | PECIAL USE | |
| (1) LOCKBOX #358180 | · · · · · · · · · · · · · · · · · · · | | _ | | C USE ONLY | |
| | SE | CTION A - Payer Inf | formation | | | |
| (2) PAYER NAME (if paying b | v credit card, enter name exact | tly as it appears on yo | our card) | (3) TOT/ | AL AMOUNT PAID (dollars and cents | |
| Lauren A. Colby | y ordan vara, emer name exper | ay us it appears on ye | nur cardy | \$100.0 | 0 | |
| (4) STREET ADDRESS LINE N | VO. 1 | | | | | |
| 10 E. Fourth Street | | | | | | |
| (5) STREET ADDRESS LINE | NO. 2 | | | | | |
| P.O. Box 113 | | | | | | |
| (6) CITY | | - | (7) S | TATE | (8) ZIP CODE | |
| Frederick | | | MD | | 21705-0113 | |
| (9) DAYTIME TELEPHONE N | UMBER (INCLUDING ARE) | A CODE) | (10) COUNTRY | | | |
| 3016631086 | omani (includino men | 10002) | US | CODE (II IV | OT IN U.S.A.) | |
| | the applicant name are differen | nt, complete Section E | | int, use conti | muation sheets (Form 159)- | |
| | | SECTION B - Applic | | , | | |
| (11) APPLICANT NAME (if pa | | e exactly as it appear | s on your card) | | | |
| FAMILY BROADCAST | TING, INC. | | | | | |
| (12) STREET ADDRESS LINE | NO. 1 | - * | | | | |
| P.O. BOX 3279 | | | | | | |
| (13) STREET ADDRESS LINE | NO. 2 | | | | | |
| <u>-</u> | | | | | | |
| (14) CITY | | · - | (15) S | ΓΑΤΈ | (16) ZIP CODE | |
| CHRISTIANSTED, ST. | | = | VĮ | | 00822- | |
| (17) DAYTIME TELEPHONE I | NUMBER (INCLUDING ARE | EA CODE) | (18) COUNTRY | CODE (IF N | OT IN U.S.A.) | |
| 3407730390 | <u></u> | | USA | | | |
| _ | | SECTION C - Paym | ent Information | L | | |
| (19A) FCC Call Sign/Other ID | | TC) (21A) Quantity | (22A) Fee Due for (PTC |) in Block | FCC Use Only | |
| WSTX | MAR | I | 20A | | | |
| (O1 L) POC COPP 1 | <u> </u> | (2(4) 50 | \$50.00 | | | |
| (23A) FCC CODE 1 | 20589 | (24A) FC | C CODE 2 | 3S200110 | OTACT | |
| (19B) FCC Call Sign/Other ID | (20B) Payment Type Code(P | TC) (21B) Quantity | | | | |
| WSTX-FM | MAR | 1 | \$50.00 | in Block 20 | The Cost Only | |
| (23B) FCC CODE 1 | | (24B) FC | C CODE 2 | | · · · · · · · · · · · · · · · · · · · | |
| (, | 20601 | () | | 3S2001100 | 01ACU | |
| (19C) FCC Call Sign/Other ID | (20C) Payment Type Code(P | TC) (21C) Quantity | (22C) Fee Due for (PTC |) in Block | FCC Use Only | |
| | | | 20C | | | |
| (23C) FCC CODE 1 | | (24C) FC | CC CODE 2 | | | |
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| (19D) FCC Call Sign/Other ID | (20D) Payment Type Code(P | (21D) Quantity | (22D) Fee Due for (PTC 20D |) in Block | FCC Use Only | |
| (23D) FCC CODE I | | (24D) FC | CC CODE 2 | • | • | |
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| | SECT | | nformation (Required) | | | |
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| PAYER TIN | 0 093264459 | APPLICA | NT TIN | 66046 | 69383 | |



GOVERNMENT OF THE VIRGIN ISLANDS OF THE UNITED STATES

Charlotte Amalie, St. Thomas, V.I. 00802

OFFICE OF THE LIEUTENANT GOVERNOR

Division of Corporation & Trademarks

Kongens Gade No. 18 Charlotte Amalie, St. Thomas US Virgin Islands 00802 (340) 774-2991

November 25, 2002

CERTIFICATE OF GOOD STANDING

This is to certify that the corporation known as FAMILY BROADCASTING, INC. filed Articles of Incorporation in the Office of the Lieutenant Governor on April 3, 1990 that a Certificate of Incorporation was issued by the Lieutenant Governor on April 5, 1990 authorizing the said corporation to conduct business in the Virgin Islands and the corporation is considered to be in good standing.

Assistant

and Trademarks

Case No. C1-31 Official Exhibit No. C1-31 Offici

| TERRITORY OF THE VIRGIN ISLANDS |) | |
|---------------------------------|---|----|
| | : | SS |
| CITY OF CHRISTIANSTED |) | |

DECLARATION

Barbara James-Petersen hereby declares under penalty of the laws of perjury that the following is true and correct:

- 1. My name is Barbara James-Petersen, and I am the daughter of Gerard Luz A. James and Asta K. James of Christiansted, St. Croix, U.S. Virgin Islands.
- 2. I was born on November 23, 1951, in Christiansted. From August of 1968 to May of 1971, and August of 1973 until April of 1974, I attended Mary Grove College, Detroit, Michigan, majoring in biology with a minor in chemistry. I received a Bachelor of Science degree from Mary Grove College. From August of 1976 until May 12, 1979, I attended Howard University School of Law, Washington, D.C., graduating with a jurisdoctorate degree.
- 3. Following graduation from Howard University, I returned home to the Virgin Islands, where I became employed in my father's law office doing legal research. I remained in that capacity until June of 1980, when I returned to the mainland and became a housewife.
- 4. In 1990, my parents purchased Station WSTX(AM) and WSTX-FM, and in September of 1990 I returned to the Virgin Islands to assist my family with the daily operation of the stations, becoming employed as general manager. In 1992. I became employed by the Virgin Islands legislature in the capacity of legal researcher and then Chief of Staff to Senator Gerard Luz James, II, my brother. In 1998, I returned to the radio stations as general manager and remain employed in that position.
- 5. My father has always attended to all of the matters connected with the relationship of the radio stations with the FCC. He and he alone filed all required applications and reports. He never involved me in any of the work.
- 6. The first time that I visited the radio stations was in September of 1990. At that time, the stations had been devastated by Hurricane Hugo. The AM tower had been blown down and it became necessary to replace the tower. That occurred in, I believe, the same year. After Hurricane Hugo came Hurricane Marilyn. Once again the station was devastated and the AM tower was blown down. Once again it had to be replaced. In November, 1999, the tower was blown over again in Hurricane Lenny, and we have been in the process of replacing it again, for the third time.



Case No. 01 - 20fficial Exhibit No.

Dispersion: Identified (GC, Beard, Party)

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Jate: Witness: Reporter:

10. Pages: 2

- 7. My father paid \$525,000 for Stations WSTX AM and FM. In the intervening years since he bought the stations, a series of hurricanes have wrecked havoc on the Virgin Islands. With each hurricane, more and more retail businesses have been destroyed and fewer and fewer advertisers have been available to support the stations. Nevertheless, the stations constitute the only valuable asset held by my father for the benefit of his children and his grandchildren.
- 8. In 1998, when I returned to the radio station, I was aware that the FM transmitter equipment was operating from the AM site, but I was not made aware that there was anything unlawful about this. I did not know the difference between an exciter and a transmitter; I was not and I am not an engineer. I have since learned, however, that the operation of the FM station from the AM site is not authorized by the station's license and I have taken steps to immediately restore the FM station to legal operation by constructing a new transmitting facility on Recovery Hill in accordance with the application which is being filed by Family Broadcasting, Inc.
- 9. The James family is a proud family in the Virgin Islands. Our ancestors came to the Virgin Islands some 400 years ago from Africa and Europe. Among our family we have lawyers, doctors, members of the legislature, and other prominent professions. My father is a proud man. Since the time that I was a little girl, he has tried to shield me and my siblings from any unpleasantness. Thus, I never knew that he had any financial difficulties at the Blue Mountain site, or that the station was evicted from the site for non-payment of rent, because he never told me. I always assumed that Stations WSTX AM and FM were operating perfectly legally, in accordance with all FCC rules and regulations and the terms of their licenses. My father never gave me any hint that this was not so. Thus, when I saw the order to show cause, I was utterly shocked.
- 10. In the order to show cause, there is an allegation that I accompanied an FCC inspector on a visit to Station WSTX(AM) and that during the visit the inspector discovered a hole in the fencing surrounding the AM towers. That is true. However, as soon as we discovered the hole, I immediately had it repaired and the repairs were completed by the end of the month in which the inspection took place. Now, the only access to the area is through a locked gate. During the same inspection, it was discovered that the power supply to the printer used by the EAS had failed and that the printer was inoperative. I was already aware of that and had contacted the manufacturer to send a new power supply, which arrived shortly after the inspector's visit, and the printer was restored to operation. At the time of the inspector's visit, it was also called to my attention that many items were missing from the stations' public file. At the suggestion of the inspector, I sent a person to the FCC in Washington to copy all of the documents in the stations' files. Thus, the public file was completely reconstructed within a short time after the inspector's visit.
- 11. My father is 75 years old and has a history of heart problems. In fact in January 2000, he was airlifted to hospital in New Orleans, where he had a triple bypass. I know that he has always tried to do the best he could for myself and the other members of his family. I also recognize, after reviewing the order to show cause, that he made some mistakes. I have discussed these matters with him and he has agreed to turn over all of his stock to other family members; resign as an officer and director of Family Broadcasting, Inc., and divest himself completely of any involvement with

the radio stations.

- 12. Legal counsel has been instructed to determine whether this requires the filing of applications with the FCC and, if it does, to prepare and file the necessary application(s). For my part, I have engaged legal and engineering communications counsel to clean up any and all FCC rule violations which may exist and I assure the Commission that if I am permitted to do that, Stations WSTX AM and FM will, in the future, operate in complete accordance with the Commission's Rules and Regulations, the Communications Act, and the terms of the stations' licenses.
- 13. Despite the technical deficiencies in the operations of the stations. I believe that they have duly served the public in the Virgin Islands. After Hurricane Marilyn, we turned over a half hour of our programming time, five days per week, to FEMA, so that they could communicate with the devastated areas of the island. We provide various departments of the Virgin Islands government with free airtime. For example, the Department of Public Safety has a one hour program running each week. Also, with the devastation in retail business which has occurred in recent years, we have supplied liberal credit to all merchants, allowing them to broadcast advertisements over our facilities without requiring immediate payment. As a practical matter, this probably means without requiring payment at all.
- 14. We are the only radio station in St. Croix which is truly locally owned. There is another station which is owned by a former resident of the British Virgin Islands, but we are the only local family to own a radio station in St. Croix. For that reason, St. Croix residents look to us primarily as their local radio station.

Further declarant sayeth not.

BARBARA JAMES-PETERSEN

Dated: Mrc 12, am

By: Darbara Janes - Peterper



United States of America

FEDERAL COMMUNICATIONS COMMISSION FM BROADCAST STATION CONSTRUCTION PERMIT

Authorizing Official:

Official Mailing Address:

FAMILY BROADCASTING, INC.

P.O. BOX 3279

(ST. CROIX ISLAND)

CHRISTIANSTED VI 00822

Facility ID: 20601

Call Sign: WSTX-FM

Permit File Number: BPH-20010316AAD

Edward P. De La Hunt

Associate Chief

Audio Division

Media Bureau

Grant Date: May 14, 2002

This permit expires 3:00 a.m. local time, 36 months after the

grant date specified above.

Subject to the provisions of the Communications Act of 1934, as amended, subsequent acts and treaties, and all regulations heretofore or hereafter made by this Commission, and further subject to the conditions set forth in this permit, the permittee is hereby authorized to construct the radio transmitting apparatus herein described. Installation and adjustment of equipment not specifically set forth herein shall be in accordance with representations contained in the permittee's application for construction permit except for such modifications as are presently permitted, without application, by the Commission's Rules.

Commission rules which became effective on February 16, 1999, have a bearing on this construction permit. See Report & Order, Streamlining of Mass Media Applications, MM Docket No. 98-43, 13 FCC RCD 23056, Para. 77-90 (November 25, 1998); 63 Fed. Reg. 70039 (December 18, 1998). Pursuant to these rules, this construction permit will be subject to automatic forfeiture unless construction is complete and an application for license to cover is filed prior to expiration. See Section 73.3598.

Equipment and program tests shall be conducted only pursuant to Sections 73.1610 and 73.1620 of the Commission's Rules.

Name of Permittee: FAMILY BROADCASTING, INC.

Station Location: VI-CHRISTIANSTED

Frequency (MHz): 100.3

Channel: 262

Class: B1

Hours of Operation: Unlimited

XI

Page 1 of 3 Family

FCC Form 351A October 21, 1985

Case No. Colored Exhibit No. 2-1 (favour 2-1) (favour 2-1) (favour Rejected Received IN THE MATTER OF:

Date: Witness: Reporter: No. Pages: 2

Transmitter: Type Accepted. See Sections 73.1660, 73.1665 and 73.1670 of the Commission's Rules.

Transmitter output power: As required to achieve authorized ERP.

Antenna type: (directional or non-directional): Non-Directional

Antenna Coordinates: North Latitude: 17 deg 44 min 11 sec

West Longitude: 64 deg 42 min 03 sec

| | Horizontally Polarized Antenna | Vertically Polarized Antenna |
|--|--------------------------------------|------------------------------------|
| Effective radiated power in the Horizontal Plane (kW): | 7.0 | 0 |
| Height of radiation center above ground (Meters): | 18 | 0 |
| Height of radiation center above mean sea level (Meters): | 268 | 0 |
| Height of radiation center above average terrain (Meters): | 247 | 0 |

Antenna structure registration number: Not Required

Overall height of antenna structure above ground: 24 Meters

Obstruction marking and lighting specifications for antenna structure:

It is to be expressly understood that the issuance of these specifications is in no way to be considered as precluding additional or modified marking or lighting as may hereafter be required under the provisions of Section 303(q) of the Communications Act of 1934, as amended.

None Required

Special operating conditions or restrictions:

- The permittee/licensee in coordination with other users of the site must reduce power or cease operation as necessary to protect persons having access to the site, tower or antenna from radiofrequency electromagnetic fields in excess of FCC quidelines.
- 2 Upon grant of a license application to cover this construction permit, the allotment will be downgraded as follows:

Community Channel No. Christiansted, VI Add 262B1 Delete 262B

THE AUTOMATIC PROGRAM TEST PROVISIONS OF 47 C.F.R. SECTION 73.1620 DO NOT APPLY IN THIS CASE. A FORMAL REQUEST FOR PROGRAM TEST AUTHORITY MUST BE FILED IN CONJUNCTION WITH THE FCC FORM 302-FM, APPLICATION FOR LICENSE, BEFORE PROGRAM TESTS WILL BE AUTHORIZED. This request should be submitted at least 10 days prior to the date on which program tests are desired to commence. This request must contain documentation which demonstrates compliance with the following special operating condition:

Special operating conditions or restrictions:

- The permittee shall submit a statement certifying that a fence has been constructed at least 6 meters from the base of the tower and in such a manner as to prevent the exposure of humans to radiofrequency electromagnetic fields in excess of the FCC Guidelines in OET Bulletin No. 65, Edition 97-01 August 1997. The fence must be of a type which will preclude casual or inadvertent access, and must include warning signs at appropriate intervals which describe the nature of the hazard.
- Documentation demonstrating compliance with the special operating condition may be submitted in advance of the filing of the FCC Form 302-FM. The Commission's staff will review it for compliance and respond by letter stating whether automatic PTA has been reinstated.
- The permittee has specified the use of a 4 section antenna to demonstrate compliance with the FCC radiofrequency electromagnetic field exposure guidelines. If any other size of antenna is to be used with the facilities authorized herein, a FORMAL REQUEST FOR PROGRAM TEST AUTHORITY must be filed in conjunction with the FCC Form 302-FM, Application for License, BEFORE program tests will be authorized. This request should be made at least 10 days prior to the date on which program tests are desired to commence. The request must include a revised RF field showing to demonstrate continued compliance with the FCC quidelines.
- This application is being granted prior to the completion of the International Telecommunications Union (ITU) registration process. Therefore, any construction of and operation with the facilities specified herein is at applicant's own risk and subject to modification, suspension or termination without right to hearing, if found by the Commission to be necessary in order to conform to the provisions of the registration process of the ITU, and to bilateral and other multilateral agreements between the United States and other countries.
- The authority granted herein is without prejudice as to whatever final action the Commission may take in EB Docket No. 01-39. In the event that revocation of Family Broadcasting's license for Station WSTX-FM becomes administratively final, this authorization will terminate immediately. Any construction of the facilities authorized herein is at the sole risk of the permittee.

*** END OF AUTHORIZATION ***